

STATEMENT
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PRESS CONFERENCE TO RELEASE

THE SURGEON GENERAL'S REPORT ON NUTRITION AND HEALTH

NOT FOR RELEASE BEFORE
11:00 A.M., JULY 27, 1988

I AM PLEASED TO RELEASE TODAY THE FIRST SURGEON GENERAL'S REPORT ON NUTRITION AND HEALTH. THIS REPORT IS A LANDMARK IN PUBLIC HEALTH SERVICE EFFORTS TO IMPROVE THE HEALTH OF THE AMERICAN PEOPLE. FOR THE FIRST TIME, WE ARE PRESENTING OUR CONSENSUS ON THE STATE ~~OF~~ KNOWLEDGE OF THE LINK BETWEEN DIET AND A BROAD RANGE OF HEALTH ISSUES. THIS REPORT PLACES PARTICULAR EMPHASIS ON THE ROLE OF DIET IN PREVENTION OF THE CHRONIC DISEASES THAT ARE LEADING CAUSES OF DEATH AND DISABILITY AMONG AMERICANS. IT ALSO DEFINES WAYS IN WHICH WE CAN CHANGE OUR DIETS TO REDUCE THE RISK FOR THESE DISEASES. THE REPORT REVEALS CLEARLY THAT THE HEALTH OF AMERICANS COULD BE IMPROVED BY CHANGING THE DIET TO ONE THAT CONTAINS LESS FAT.

IN FORMER YEARS, OUR MAIN CONCERN ABOUT NUTRITION FOCUSED ON THE NEED TO OBTAIN ENOUGH CALORIES AND NUTRIENTS FROM THE DIET TO MEET PHYSIOLOGICAL REQUIREMENTS. TODAY, AN ABUNDANT FOOD SUPPLY HAS MADE IT POSSIBLE FOR MOST PEOPLE IN THIS COUNTRY TO AVOID NUTRITIONAL DEFICIENCY DISEASES. INSTEAD, NUTRITIONAL PROBLEMS FOR MOST AMERICANS HAVE SHIFTED TO THOSE CREATED BY OVERCONSUMPTION OF CERTAIN DIETARY COMPONENTS. OF GREATEST CONCERN IS OUR EXCESSIVE INTAKE OF DIETARY FAT--AND ITS RELATIONSHIP TO RISK FOR CHRONIC DISEASES SUCH AS CORONARY HEART DISEASE, SOME TYPES OF CANCERS, DIABETES, HIGH BLOOD PRESSURE, STROKES, AND OBESITY.

THESE CONDITIONS HAVE MULTIPLE CAUSES. THEY ARE CREATED BY AN AS YET INCOMPLETELY UNDERSTOOD COMBINATION OF BEHAVIORAL,

ENVIRONMENTAL, AND GENETIC FACTORS, SOME OF WHICH ARE BEYOND OUR POWERS TO CONTROL. MY CONCERN IS ABOUT THE FACTORS THAT CAN BE CONTROLLED. IF YOU, FOR EXAMPLE, ARE AMONG THE TWO OUT OF THREE AMERICANS WHO DO NOT SMOKE OR DO NOT DRINK EXCESSIVELY, YOUR CHOICE OF DIET CAN INFLUENCE YOUR LONG-TERM HEALTH PROSPECTS MORE THAN ANY OTHER ACTION YOU MIGHT TAKE.

THIS MAY NOT SEEM SURPRISING. BUT WHAT THIS PIONEERING REPORT HAS, IN FACT, ACCOMPLISHED IS A RIGOROUS ANALYSIS OF THE EXISTING EVIDENCE AND THE DEVELOPMENT OF CONCLUSIONS AND RECOMMENDATIONS BASED ON THE BEST THAT SCIENCE CAN OFFER. ONE WAY TO APPRECIATE THE ENORMITY OF THIS EFFORT IS TO PUT THIS ANALYSIS IN THE CONTEXT OF WHAT WAS KNOWN ABOUT THE RELATIONSHIP OF CIGARETTE SMOKING TO HEALTH IN 1964. SURGEON GENERAL LUTHER TERRY RELEASED THE FIRST REPORT ON SMOKING AND HEALTH 24 YEARS AGO ON THE STRENGTH OF EPIDEMIOLOGICAL STUDIES--EXAMINATIONS OF RATES OF SMOKING AND LUNG CANCER IN POPULATION GROUPS. SUBSEQUENT STUDIES HAVE SUPPORTED THESE EARLY CONCLUSIONS.

THE PREPARATION OF THIS REPORT HAS BEEN JUST AS PAINSTAKING AND HAS INVOLVED THOROUGH REVIEW OF AN EVEN BROADER SCIENTIFIC BASE. OVER A FOUR-YEAR PERIOD OF PREPARATION, THE MORE THAN 50 NUTRITION SCIENTISTS WHO CONTRIBUTED TO THE WRITING OF THIS REPORT, AND THE NEARLY 200 WHO CONTRIBUTED TO ITS REVIEW, HAD THE FORMIDABLE TASK OF EXAMINING MORE THAN 2,500 SCIENTIFIC ARTICLES. THESE ARTICLES PRESENTED THE RESULTS OF EPIDEMIOLOGICAL

INVESTIGATIONS, AS DID THE SMOKING REPORT, BUT IN THIS CASE, ANIMAL AND BIOCHEMICAL STUDIES AND CLINICAL TRIALS WERE ALSO EXAMINED IN ORDER TO ARRIVE AT ITS CONCLUSIONS AND RECOMMENDATIONS.

THE FOUR PRINCIPAL CONCLUSIONS OF THIS REPORT ARE THESE:

FIRST: DIETARY CHANGES CAN IMPROVE THE HEALTH PROSPECTS OF MANY AMERICANS.

SECOND: OVERCONSUMPTION AND IMBALANCES IN INTAKE OF CERTAIN DIETARY COMPONENTS INCREASE THE RISK OF CHRONIC DISEASES AMONG AMERICANS.

THIRD: OF PRIMARY IMPORTANCE IS THE NEED TO REDUCE CONSUMPTION OF FAT, ESPECIALLY SATURATED FAT.

FOURTH: SIMILAR DIETARY CHANGES APPLY TO PREVENTION OF MULTIPLE CHRONIC DISEASE CONDITIONS.

THESE CONCLUSIONS ARE BASED ON EVIDENCE THAT DIETS THAT CONTAIN A LARGE PROPORTION OF CALORIES FROM FOODS HIGH IN FAT BUT LOW IN COMPLEX CARBOHYDRATES AND FIBER ARE ASSOCIATED WITH AN INCREASED RISK OF CORONARY HEART DISEASE, AND THAT SUCH DIETS ARE ALSO ASSOCIATED WITH INCREASED RISK OF DIABETES, OBESITY, AND SOME TYPES OF CANCER. AS I MENTIONED EARLIER, THESE ASSOCIATIONS ARE

SUPPORTED BY EVIDENCE DERIVED FROM A RESEARCH BASE EVEN MORE COMPREHENSIVE THAN THAT FOR THE 1964 REPORT ON SMOKING.

THIS REPORT ~~WAS~~ PREPARED PRIMARILY FOR NUTRITION POLICY MAKERS, ALTHOUGH THE EVENTUAL BENEFICIARIES WILL BE THE AMERICAN PEOPLE. THE IMPORTANCE OF THE REPORT'S IMPLICATIONS FOR PUBLIC HEALTH WILL BE SEEN IN THE MAGNITUDE OF THE PROBLEMS AT HAND, THE OVERALL CONSISTENCY OF THE EVIDENCE, AND THE SIMILARITY OF DIETARY PRINCIPLES FOR REDUCING THE RISK OF MULTIPLE DISEASE CONDITIONS. THE THREE MAJOR POLICY AREAS ARE: DIETARY GUIDANCE AND EDUCATION, NUTRITION PROGRAMS AND SERVICES, AND NUTRITION RESEARCH AND SURVEILLANCE.

SOME OF THE REPORT'S IMPLICATIONS FOR DIETARY GUIDANCE AND EDUCATION INCLUDE THE NEED FOR:

- IMPROVED EDUCATION OF THE PUBLIC ABOUT DIETARY CHOICES MOST CONDUCTIVE TO GOOD HEALTH, ESPECIALLY AMONG GROUPS AT GREATEST RISK--THE POOR, MOTHERS AND INFANTS, AND OLDER AMERICANS,
- IMPROVED USE OF NUTRITION LABELS TO HELP CONSUMERS IDENTIFY FOODS THAT MEET ITS RECOMMENDATIONS, AND
- MORE AND BETTER EDUCATION IN NUTRITION FOR PHYSICIANS

AND OTHER HEALTH PROFESSIONALS WHO COUNSEL THE PUBLIC ABOUT DIET AND HEALTH.

IN THE AREA OF NUTRITION PROGRAMS AND SERVICES, THE REPORT'S FINDINGS EMPHASIZE THE IMPORTANCE OF:

- IDENTIFICATION AND REMOVAL OF THE BARRIERS TO OPTIMAL HEALTH AND NUTRITIONAL STATUS AMONG THE GROUPS IN OUR POPULATION WHO ARE MOST AT RISK OF CHRONIC DISEASE,
- THE INCORPORATION OF NUTRITION SERVICES INTO HEALTH CARE PROGRAMS FOR AMERICANS OF ALL AGES,
- THE NEED FOR INCREASED AVAILABILITY OF FOODS AND FOOD PRODUCTS THAT ARE LOW IN FAT, YET CONSISTENT WITH THE OTHER DIETARY RECOMMENDATIONS OF THIS REPORT, AND
- THE NEED FOR ADHERENCE OF ALL FOOD SERVICE PROGRAMS TO THE REPORT'S RECOMMENDATIONS.

FINALLY, THE REPORT'S CONCLUSIONS POINT TO THE NEEDS FOR:

- IMPROVED SURVEILLANCE OF NUTRITIONAL STATUS, ESPECIALLY AMONG HIGH-RISK GROUPS, AND

-- EXPANDED RESEARCH INVESTIGATIONS INTO THE RELATIONSHIPS
BETWEEN DIETARY FACTORS AND HEALTH.

THIS IS A LARGE ORDER. IT NOT ONLY POSES A CHALLENGE TO THOSE OF US IN THE GOVERNMENT, BUT DOES SO IN THE PRIVATE SECTOR AS WELL, TO HEALTH PROFESSIONALS, TO EDUCATORS, AND TO POLICY MAKERS, IN SCHOOLS, BUSINESSES, LABOR, AND COMMUNITY GROUPS. LASTLY, THE CHALLENGE WILL BE AN INDIVIDUAL ONE.

I HAVE ASKED MY COLLEAGUES IN THE PUBLIC HEALTH SERVICE TO TAKE THE LEADERSHIP IN A NATIONAL CAMPAIGN TO CHANGE THE AMERICAN DIET TO ONE THAT IS BETTER FOR OUR HEALTH. THEY WILL TELL YOU HOW THEY PLAN TO MEET THIS CHALLENGE, WILL PRESENT THE REPORT'S SPECIFIC RECOMMENDATIONS, AND WILL ELABORATE ON ITS FINDINGS AND IMPLICATIONS. THEY ARE ALSO PREPARED TO ANSWER YOUR QUESTIONS.

HERE IS DR. J. MICHAEL MCGINNIS, ASSISTANT SURGEON GENERAL AND CHAIRMAN OF THE DEPARTMENT'S NUTRITION POLICY BOARD, TO PRESENT THE SPECIFIC RECOMMENDATIONS OF THIS IMPORTANT REPORT.

[INTRODUCTION OF DR. MCGINNIS]